### FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)  1. Name and Address of Reporting Person* Ford Kristee Michelle			2. Issuer Name and Ticker or Trading Symbol MUELLER INDUSTRIES INC [MLI]						5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last) (First) (Middle) 581 ROCKY JOE DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 07/26/2018						X Officer (give title below) Other (specify below)  Chief Information Officer						
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)						-	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
COLLIE	RVILLE,									_		a of more than	one responding	Cison	
(City	)	(State)	(Zip)	T	able I	- Non	-Deriv	vative S	ecurities .	Acquir	red, Dispo	osed of, or l	Beneficially	Owned	
1.Title of S (Instr. 3)	2. Transaction Date (Month/Day/Year		2A. Deemed Execution Date, i any (Month/Day/Yea	(Instr. 8)		(A) or Disposed o (D) (Instr. 3, 4 and 5)		Beneficia		nt of Securities ally Owned Following Transaction(s) and 4)		6. Ownership Form: Direct (D)	Beneficial Ownership		
					C	ode	V	Amoun	(A) or (D)	Price		(I)		or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock		07/26/2018			A		5,000 A	A	5 0 5,0	5,000			D		
Reminder:	Report on a s	separate line fo	each class of secur	ities beneficially o	wned	Į.	Perso contai	ns who	respon this for	n are	not requ		spond unle	ss	1474 (9-02)
Reminder:	Report on a s	separate line fo	Table II - I	Derivative Securi	ties Ac	quire	Perso contai the for	ons who ined in orm dis posed o	o respon this for plays a c	n are urren ficially	not requ tly valid	ired to res		ss	1474 (9-02)
			Table II - I	Derivative Securi e.g., puts, calls, w	ties Ac	quire	Perso contai the for d, Disp tions, c	ons who ined in orm dis posed o convert	o respon this for plays a c f, or Bene ible secur	n are urren ficially ities)	not requ itly valid y Owned	ired to res	spond unle trol numbe	ss r.	, , ,
1. Title of Derivative Security		3. Transaction Date (Month/Day/Y	Table II - I  (a) 3A. Deemed Execution Day (a) (a) (b) (c) (a) (d) (d) (d) (d) (ex) (d) (ex) (d) (ex) (d) (ex) (ex) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	Derivative Securi e.g., puts, calls, w	ties Ac arran	cquire ts, opt ber vative rities ired r osed )	Perso contai the for d, Disp tions, c	ons who ined in orm dis posed o	this form plays a configure of the securion of the securior of the securior of the securion of the securion of the securior of the securior of	ficially ities) 7. Tit Amou Unde Secur	not requitly valid  y Owned  tle and unt of erlying	OMB conf	spond unle	of 10. Ownersl Form of Derivati Security Direct (1 or Indire	11. Natur of Indired Beneficia Ownersh (Instr. 4)

P ( O N /		Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Ford Kristee Michelle 581 ROCKY JOE DRIVE COLLIERVILLE, TN 3801	7		Chief Information Officer					

## **Signatures**

Anthony Steinriede, Attorney-in-Fact	07/27/2018
**Signature of Reporting Person	Date

### **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. *See* 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) These shares will vest on 7/30/2023.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.